

## CHAMPVA POLICY MANUAL

CHAPTER: 2  
SECTION: 35.2  
TITLE: PAPANICOLAOU (PAP) TESTS

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**AUTHORITY:** 38 CFR 17.270(a) and 17.272(a)(31)(v)

**RELATED AUTHORITY:** 32 CFR 199.4 (g)(1), (g)(2), and (g)(37)

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### I. EFFECTIVE DATE

- A. November 5, 1990
- B. January 26, 2000, automated thin layer preparation Pap testing and computer-assisted Pap screening.

### II. PROCEDURE CODE(S)

88141-88155, 88160-88162, 88164-88167, 88174-88175, 99201-99215, 99301-99313

### III. DESCRIPTION

Papanicolaou (Pap) test is an exfoliative cytological staining procedure for the detection and diagnosis of various conditions, particularly malignant and premalignant conditions of the female genital tract. Pap tests are performed as either a diagnostic or screening test. Diagnostic Pap tests are tests performed on symptomatic females presenting with signs or symptoms of malignant or premalignant disease or pregnancy. Screening Pap tests are performed on asymptomatic females who do not present with signs or symptoms of cervical or medical disease.

### IV. POLICY

A. Cervical Pap tests are covered on either a diagnostic or screening basis subject to the circumstances and guidelines discussed in the following paragraphs.

1. Diagnostic Pap tests may be cost shared under the following circumstances:
  - a. previous cancer of the cervix, uterus or vagina;
  - b. previous abnormal Pap test;
  - c. irritation or inflammation of the cervix;

- d. abnormal vaginal bleeding;
- e. abnormal vaginal discharge;
- f. intrauterine exposure to diethylstilbestrol;
- g. as part of the prenatal laboratory work up for a new maternity patient; or
- h. as part of the care for women undergoing estrogen replacement therapy.

**B. Screening Pap tests.**

1. Screening Pap tests are covered for females 18 years and older; for those 18 and younger when recommended by the clinician; or for those at high risk for sexually transmitted diseases, those who have had multiple sexual partners (or if their partner has had multiple partners); for those with a history of cigarette smoking; and those with a history (personal or family) of cervical cancer.

2. The frequency of the Pap test will be at the discretion of the clinician, although the recommended frequency is no less than once every three years.

**V. POLICY CONSIDERATIONS**

A. Physical Examination. Pelvic examinations should be performed in conjunction with Pap smear testing for cervical neoplasm and premalignant lesions.

B. Services that are rendered during the same office visit of a screening Pap test as long as the service is considered medically necessary and is documented as such, and would not otherwise be considered integral to the office visit, may be cost shared.

C. Reimbursement for screening pap smears shall not exceed the reimbursement for the intermediate office level visit except when performed in connection with other preventive services, in which case reimbursement will be allowed for the appropriate comprehensive health promotion and disease prevention examination office visit (CPT codes 99382-99386 and 99392-99396). Claims for screening pap smears which are coded at a level greater than the intermediate level office visit and for which no additional preventive services have been provided will be reimbursed at the allowable charge for either CPT code 99203 or 99213. Separate charges for the preparation, handling, and collection of the screening cervical pap test are considered to be an integral part of the routine office examination visit and will not be allowed.

D. Reimbursement for cytopathology laboratory procedures associated with screening Pap tests should be billed using the appropriate CPT codes. Reimbursement for these procedures are limited to the total CHAMPVA Maximum Allowable Charge (CMAC) and will only be paid once, regardless of whether the attending physician or the laboratory bills for the services. Under no circumstances will the CMAC for these procedure codes be split into the technical and professional components.

## **VI. EXCLUSIONS**

Cervicography when used in conjunction with a Pap smear.

**\*END OF POLICY\***